Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90007 024 ***150.00

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200001103

FIFTY RESTAURANTS, INC.

Principal Place	e of Business	Mailing Address					
603 MAIN ST		603 MAIN STREET					
WINDERMERE F	L 34786	WINDERMERE FL 34786					
US		US	US		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					10/26/1992		ì
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	plied For
21		26			59-3167785	No ¹	t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			_	\$8.75 A	
─ ` ` ' '	#, 6tc.	— · · · ·			5. Certificate of Status Desired	Fee Re	
22		City & State	City & State		6 Fleeties Compaign Financing	\$5.00	
City & State	5	├ ─ '	-		6. Election Campaign Financing Trust Fund Contribution	Added to	
23		28	Zip Country				31663
			30		8. This corporation owes the current year		□No
24	25		0]		Personal Property Tax.		
	9. Name and Address of C	urrent Registered Agent	- 04		10. Name and Address of New Registere	a Agent	
DIZNEY, DONALD R			81	Name			
		82	Street Add	ress (P.O. Box Number is Not Acceptable)			
	MAIN ST						
WINE		83					
			84	City	F	85 Zip C	;ode
44 Dunauant	to the previous of Costions 60	7 0502 and 607 1508 Florida Statutes	the abov	e-named corr	poration submits this statement for the purpose	of changing its	registered
office or re	egistered agent, or both, in the t	State of Florida. Such change was autr	norized by	the corporati	ion's board of directors. I hereby accept the app	ointment as rec	gistered
agent. I a	m familiar with, and accept the o	obligations of, Section 607.0505, Florid	a Statutes	i.			ĺ
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg				nt signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DC IN 12
12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		Addition
TITLE '	DCAS	☐ DELETE	1.1 TITLE			☐ Change	L Addition
NAME	DIZNEY, DONALD R		1.2 NAME				
STREET ADDRESS	603 MAIN ST 1.3 S		1.3 STREE	TADDRESS			
CITY-ST-ZIP	WINDERMERE FL		1,4 CITY-5	IT-ZIP			
TITLE	DPT	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	ENGLISH, JAMES E		2.2 NAME				ĺ
STREET ADDRESS	603 MAIN ST		2 3 STREE	T ADDRESS			
	WINDERMERE FL						
CITY-ST-ZIP			2. 4 CITY-1	\$1-212		Change	Addition
TTLE			3.1 IIILE				
NAME	BARKMAN, KEVIN						
STREET ADDRESS	000 0 .		3.3 STREE	TADDRESS		•	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
ΠΠLE	V □ DELETE 4.1 TI		4.1 TITLE			Change	☐ Addition
NAME	DIZNEY, DAVID	4.2					ĺ
STREET ADDRESS	COO MAIN OT		4.3 STREE	T ADDRESS			ł
CITY-ST-ZIP	WINDERMERE FL	44		ST-ZIP			1
TITLE			5.1 TITLE			☐ Change	Addition
		_	52 NAME	l		_	
NAME				T ADDRESS			
STREET ADDRESS				1			
CITY-ST-ZIP			5.4 CITY-S 6.1 TITLE	31- ZIP		Change	Addition
TITLE		☐ DELETE		1		change	
NAME			6.2 NAME				
PERCENT ADDRESS	1		6.3 STREE	TADDRESS !			

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the conforation or the repover or rubies empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: